KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U3C
June 2015
Form must be Typed
Form must be completed on a per well basis

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.

OPERATOR: License # 3553
Name: Citation Oil & Gas Corp.
Address 1: 14077 CUTTEN RD
Address 2: PO BOX 690688
City: HOUSTON State: TX Zip: 77269 + 0688
Contact Person: Griselda Medina
Phone: (281) 891-1000
Lease Name: ANSON EAST
Well Number: 3-WO-1

API No.: 15-191-10030-00-01
Permit No: E11093.2
Reporting Year: 2017
(January 1 to December 31)

____ - W2 - SW - SE Sec. 7 Twp. 31 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
683 feet from ☐ N / ☑ S Line of Section
2441 feet from ☑ E / ☐ W Line of Section
County: Sumner

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: ____ mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1000 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: ____ *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	18297	450	0		31
February	14930	450	0		28
March	15144	450	0		31
April	15069	450	0		30
May	17755	450	0		31
June	15424	450	0		30
July	16142	450	0		31
August	13609	450	0		31
September	16744	425	0		30
October	16658	425	0		31
November	18185	425	0		29
December	19677	600	0		31
TOTAL	197634		0		

Submitted Electronically